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23557 75	590 01/30/20	09				-	mission	
SALIWANCHIK A PROFESSIONA PO Box 142950	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
GAINESVILLE, FL 32614				N/A - filed EFS (Depositor's name)				
TEL: (352) 375-8100 FAX: (352) 372-5800				(Signature)				
				April 29, 2009 (Date)				
APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVEN		ATTORN		NO. CONFIRMATION NO.	
09/266,346	09/266,346 03/11/1999		JACK L. ARONOWITZ		ARO.104 5679			5679
TITLE OF INVENTION: NONINVASIVE TRANSDERMAL SYSTEMS FOR DETECTING AN ANALYTE IN A BIOLOGICAL FLUID AND METHODS								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSI	JE FEE	TOTAL FEE(S) DUE	1	DATE DUE
nonprovisional	YES	\$755	\$0	\$0		\$755	C	14/30/2009
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS				,	
WINAKUR, ERIC FRANK		3768	600-310000					
1. Change of correspondenc CFR 1.363). Change of corresponded correspondence of cor	dence address (or Chang 22) attached.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Saliwanchik, Lloyd & Saliwanchik 2 2 3 1 1 1 2 1 1 2 1 1 2 1 1 2 1 1						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) JACK L. ARONOWITZ Pompano Beach, FL Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government								
4a. The following fee(s) are Issue Fee Publication Fee (No	Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached: The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).							
5. Change in Entity Status	MALL ENTITY status.	See 37 CFR 1.27.	☐ b. Applicant is no	longer claiming SMA	ALL ENTI	TY status. See 37 Cl	FR 1.27(g)(2).
NOTE: The Issue Fee and I interest as shown by the rec	1	1/ ()*	1/-4				ne assigne	e or other party in
Authorized Signature	David,	Jahuan	duc			29, 2009		
Typed or printed name _				Registration				·····
This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313 Under the Paperwork Redu	lity is governed by 35 Upplication form to the Upplication form to the Upplication for reducing this burden 22313-1450. DO No. 1450	.S.C. 122 and 37 CFR ISPTO. Time will vary en, should be sent to th NOT SEND FEES OR	depending upon the interest of the control of the c	ndividual case. Any officer, U.S. Patent an S TO THIS ADDRES	comments d Tradema SS. SEND	on the amount of the office, U.S. Deporto: Commissioner	me you re artment of for Patent	SPTO to process) ng, preparing, and quire to complete Commerce, P.O. s, P.O. Box 1450,